Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Filing at a Glance

Company: Transamerica Life Insurance Company

Product Name: SA02 0910T SERFF Tr Num: AEGB-126827169 State: Arkansas
TOI: L04I Individual Life - Term SERFF Status: Closed-Approved-State Tr Num: 46996

Closed

Sub-TOI: L04I.500 Other Co Tr Num: SA02 0910T State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Author: Mara Carberry Disposition Date: 10/08/2010

Date Submitted: 10/06/2010 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name: Fixed Settlement Endorsement Election Status of Filing in Domicile: Pending

Project Number: SA02 0910T Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 10/08/2010 Explanation for Other Group Market Type:

State Status Changed: 10/08/2010

Deemer Date: Created By: Mara Carberry

Submitted By: Mara Carberry

Corresponding Filing Tracking Number:

30822770, 30822730, 30822720, 30822750

(TLIC)

Filing Description:

TRANSAMERICA LIFE INSURANCE COMPANY NAIC#468-86231

Form Numbers:

SA02 0910T - Fixed Settlement Endorsement Election

Dear Sir/Madam:

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Please find attached a copy of the above referenced form. This is new form and is not intended to replace any form previously approved by your Department. This form has been submitted in final printed form in which it will be distributed to Insureds. This form is subject to only minor modifications in paper size and stock, ink, border, Company logo, Company address, adaptation to computer printing, and Officers' signatures. This form is also being filed on our sister company of Western Reserve Life Assurance Co. of Ohio under SERFF Tracking # AEGB-126827170.

Fixed Settlement Endorsement Election – is a supplemental application that will be used by the policy owner to elect their Net Death Benefit settlement option at the time of policy issue.

We intend to use the Fixed Settlement Endorsement Election with the Fixed Settlement Endorsement form IPO01 which was approved by your department on September 13, 2010, SERFF Tracking # AEGB-126772756.

This supplemental application will be used via paper by licensed agents. We intend to use this form in a traditional manner whereby the owner/applicant signs the application in ink and submits the application to the Company.

We also plan to make this application form available electronically. It is our intent to use this application form in a variety of electronic environments, including a laptop and web based application process. Regardless of the application process used, we intend to adopt measures to secure both the integrity of the document once signed, and the confidentiality of any information transmitted, including transmission of information via a secured socket layer/secured line. The information contained in the application will be transmitted to our administrative office electronically as well as the electronic signature of the owner/applicant. Current technology will be used to ensure that the confidential information is not compromised. All processes used will comply with the Uniform Electronic Transactions act, and to the extent applicable, the Federal ESIGN Act.

We hereby certify that any electronic signature we obtain will be linked to the date on the electronic application in such a manner that the electronic signature is invalidated if any of the data on the application is changed. We also certify that such electronic signature intended for use with this application will not be affixed to or duplicated on any other document.

A copy of the application, identical to the filed form, will be printed and made part of any policy issued.

We would appreciate your review and approval of this form. Should you have any questions or need any additional information, please do not hesitate to contact me.

Mara Carberry
Policy Analyst, Contract Development
(319) 355-3497 (collect)
Fax #: (319) 355-2501

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

mcarberry@aegonusa.com

Company and Contact

Filing Contact Information

Mara Carberry, Policy Analyst mcarberry@aegonusa.com
4333 Edgewood Rd. NE 319-355-3497 [Phone]
MS 2225 319-355-2501 [FAX]

Cedar Rapids, IA 52499

Filing Company Information

Transamerica Life Insurance Company CoCode: 86231 State of Domicile: Iowa

4333 Edgewood Road, NE Group Code: 468 Company Type:
Cedar Rapids, IA 52499 Group Name: State ID Number:

(319) 355-7888 ext. [Phone] FEIN Number: 39-0989781

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No

Fee Explanation: \$50.00/form/company x 1= \$50.00

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Transamerica Life Insurance Company \$50.00 10/06/2010 40358855

 SERFF Tracking Number:
 AEGB-126827169
 State:
 Arkansas

 Filing Company:
 Transamerica Life Insurance Company
 State Tracking Number:
 46996

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	10/08/2010	10/08/2010

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Disposition

Disposition Date: 10/08/2010

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

 SERFF Tracking Number:
 AEGB-126827169
 State:
 Arkansas

 Filing Company:
 Transamerica Life Insurance Company
 State Tracking Number:
 46996

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Schedule	Schedule Item	Schedule Item Status Public Access
Supporting Document	Flesch Certification	Yes
Supporting Document	Application	Yes
Supporting Document	Life & Annuity - Acturial Memo	No
Supporting Document	Statement of Variability	Yes
Form	Fixed Settlement Endorsement Election	Yes

 SERFF Tracking Number:
 AEGB-126827169
 State:
 Arkansas

 Filing Company:
 Transamerica Life Insurance Company
 State Tracking Number:
 46996

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Form Schedule

Lead Form Number: SA02 0910T

Schedule Item Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	SA02 0910T	Application/Fixed Settlement Enrollment Endorsement Form Election	Initial		50.500	SA02 0910T.pdf



Home Office located at: [4333 Edgewood Road NE, Cedar Rapids, Iowa 52499]

FIXED SETTLEMENT ENDORSEMENT ELECTION

You have requested to pay the Net Death Benefit of your policy through the Fixed Settlement Endorsement. The payments requested below are requests only and the payments shall be made as outlined in the Fixed Settlement Endorsement and the Policy Data. This form will be made part of your policy. All requested payments are subject to the terms of the policy and the Fixed Settlement Endorsement. If there are multiple Beneficiaries listed on the policy, the payments will be proportionately split between them unless otherwise indicated in the Special Instructions.

The undersigned owner hereby requests that the Net Death Benefit be paid as follows:		
Initial Lump Sum \$ shall be paid to the Beneficiary when the company determines that the policy's death benefit is payable. (minimum of [\$10,000] required)		
Monthly Payments \$ per month shall be paid to the Beneficiary for the Guaranteed Period. (minimum of [\$100] per Beneficiary required)		
Guaranteed Period The amount of time during which monthly payments shall be made is years (must be at least [5] years and not more than [25] years).		
Final Lump Sum \$ shall be paid to the Beneficiary at the end of the Guaranteed Period. (minimum of [\$10,000] required)		
Special Instructions		
Signature of owner Date		

Company Tracking Number: SA02 0910T

TOI: L041 Individual Life - Term Sub-TOI: L041.500 Other

Product Name: SA02 0910T

Project Name/Number: Fixed Settlement Endorsement Election/SA02 0910T

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification

Comments: Attachments:

Flesch Score T.pdf

AR - Rule and Regulation 19.pdf

Item Status: Status

Date:

Satisfied - Item: Application

Comments:

Fixed Settlement Endorsement form # IPO01was approved on September 13, 2010.

Item Status: Status

Date:

Satisfied - Item: Statement of Variability

Comments: Attachment:

SA02 0910T Statement of Variability.pdf

TRANSAMERICA LIFE INSURANCE COMPANY FLESCH READABILITY CERTIFICATION

Form Number (may vary by state)	Flesch Score
SA02 0910T	50.5
I certify that the machine scored Flesch Readability score is accurate.	for the above mentioned form
Cheryl Bock, Assistant Vice President, Contract Development	nent

RULE AND REGULATION 19 STATE OF ARKANSAS

Form Number:
Date:
I hereby certify that the accompanying life product is in compliance with Rule and Regulation 19.

TRANSAMERICA LIFE INSURANCE COMPANY STATEMENT OF VARIABILITY

SUPPLEMENTAL APPLICATION: SA02 0910T

We have bracketed the variable items in this form. No change in the variability will be made which in any way expands the scope of the wording. Transamerica Life Insurance Company reserves the right to correct, at any time, any and all typographical errors that do not impact the benefits or intent of language.

SA02 0910T - Fixed Settlement Endorsement Election Supplemental Application

- 1. **Administrative Office Address:** The Administrative Office address may change to another location in the future.
- 2. **Initial Lump Sum**: The minimum amount required is currently \$10,000 but could change in the future.
- 3. **Monthly Payments:** The minimum amount is currently \$100 but could change in the future.
- 4. **Guaranteed Period**: The amount of time during which monthly payments shall be made, if elected, currently is at least 5 years and not more than 25 years. This could change in the future.
- 5. **Final Lump Sum:** The minimum amount required is currently \$10,000 but could change in the future.